DOCUMENT RESUME

ED 402 429 CE 073 054

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TITLE Need for Staff Development Training in Identification

of Learning Disabled Students. A Discussion Paper.

PUB DATE 9 Nov 95

NOTE 13p.; Paper presented at the Annual Meeting of the

Mid-South Educational Research Association (Biloxi,

MS, November 9, 1995).

PUB TYPE Viewpoints (Opinion/Position Papers, Essays, etc.)

(120) -- Speeches/Conference Papers (150)

EDRS PRICE MF01/PC01 Plus Postage.

DESCRIPTORS Adult Educators; *Adult Students; *Disability Identification; Educational Needs; Educational

Practices; *Inservice Teacher Education; *Learning Disabilities; Staff Development; State Surveys;

Teaching Methods

IDENTIFIERS *Mississippi

ABSTRACT

The extent to which Mississippi teachers receive specific training regarding screening for learning disabilities and teaching learning-disabled adults was examined through a mail survey of all 81 of Mississippi's adult education supervisors. Of the 36 supervisors who returned usable questionnaires (a 44% response rate), 5 (13.9%) did not attempt to screen for learning disabilities. Of the 10 respondents (27.7%) reporting using a screening instrument, however, only 2 used an instrument appropriate for screening for learning disabilities. Teacher observation was the screening tool of choice for 25 (69.4%) supervisors, 13 (36.1%) checked students' records, and 25 (69.4%) asked students whether they had been diagnosed as having a learning disability. At least 2 screening methods (instrument, observation, records, and/or asking) were used in 27 of the 31 programs where screening was practiced. Ten supervisors (27.7%) reported providing training for teachers in identifying and teaching learning-disabled students. Where training was provided, it ranged from 1-20 hours per year. Many of the adult education supervisors failed to display an effective grasp of learning disabilities concepts. (Contains 24 references.) (MN)



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NEED FOR STAFF DEVELOPMENT TRAINING IN IDENTIFICATION OF LEARNING DISABLED STUDENTS

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NEED FOR STAFF DEVELOPMENT TRAINING IN IDENTIFICATION OF LEARNING DISABLED STUDENTS

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Public laws require accommodations be made for learning disabilities, necessitating identification of learning disabled students. This study examined local staff development training in identification of learning disabled students. Measures of screening activities, subject understanding of basic learning disabilities concepts, and the frequency and duration of staff development training were obtained from a sample of supervisors of public adult education programs.

Descriptive statistics were used to analyze the type of screening activities and the frequency and duration of local staff development activities. Qualitative methodology was used to analyze the understanding of basic concepts by the supervisors. Constructs were created based on the qualitative analysis and a metric was devised to reflect understanding of basic concepts.

A descriptive picture of the state of learning disabilities screening and training was obtained. Results indicate a lack of adequate screening, non-uniformity of staff development training and suggest the need for additional training and improved screening.

In 1988, the National Joint Committee on Learning Disabilities (NJCLD) developed the following revised definition for Learning Disabilities:

Learning disabilities is a general term that refers to a heterogeneous group of disorders manifested by significant difficulties in the acquisition and use of listening, speaking, reading, writing, reasoning, or mathematical abilities. These disorders are intrinsic to the individual, presumed to be due to central nervous system dysfunction and may occur across the life span. Problems in self-regulatory behaviors, social perception and social interaction may exist with learning disabilities but do not by themselves constitute a learning disability. Although learning disabilities may occur concomitantly with other handicapping conditions (for example, sensory impairment, mental retardation, social and emotional disturbance) of with extrinsic



influences (such as cultural differences, insufficient or inappropriate instruction) they are not the result of these conditions or influences (NJCLD, 1988, p.1).

Moats and Lyon (1993) interpreted the various federal laws which mandate education and related services for learning disabled persons as follows: (a) The Individuals with disabilities Act (IDEA, formerly the Education for All Handicapped Children Act, or P.L. 94-142); (b) Section 504 of the Rehabilitation Act and interpretations of that by federal agencies; (c) Letters of findings issued by the Office of Civil Rights and similar policy clarifications by the U.S. Office of Education; and (d)The Americans with Disabilities Act of 1992.

The point made by Moats and Lyon was that together, these laws mandate individualized programs for learning disabled students. They saw learning disabilities as a barrier not unlike a sensory limitation, a barrier which is characterized by the law as one for which appropriate compensation exists. They cited as examples of compensations: (a) the use of special technology; (b) environmental modifications; (c) physical assistance such as note takers and proof readers; (d) curricular adjustments; and (e) testing accommodations such as modified formats, scribes, readers and extra time. The U.S. Department of Education recognized learning disabled adults as a population for which services were required. In Fact Sheet Number 9 (U.S. Department of Education, 1993), the Division of Adult Education and Literacy cited the inclusion of learning disabled persons as a population of adult learners and recognized the use of special devices such as audiocassette tapes as accommodations for LD adults. The requirement to provide accommodations for learning disabled persons in educational programs or when using testing as a basis for awarding or withholding benefits is a matter of public law. The Americans With Disabilities Act (ADA) (1990) prohibited discrimination on the basis of disability in employment, public services and accommodations and telecommunications. Title II of that act prohibits discrimination in the offering of benefits, services and programs to any disabled individual by any public entity (King and Jarrow, 1992).

The number of adult learners who may be learning disabled is large. During 1990, in the United States some 2,435,649 people participated in adult basic education programs; another 1,100,321 participated in adult secondary education programs (Snyder, 1992). There are various estimates of the percentage of adult education students who are learning disabled. Travis (1979) concluded that as high as 80 percent of the adult basic education students might be learning disabled. The Office of Technology Assessment (OTA, 1993) estimated between 30 and 80 percent of adults who read below the eighth grade level are learning disabled. Ross and Smith (1990) noted that adults in adult basic education classes share a common characteristic found in all definitions of learning disabilities, that is low academic achievement. Ross-Gordon (1989) suggested that it is intuitive that learning disabled adults make up a sizable proportion of the adult education population given the fact that a disproportionate number of learning disabled students drop out of the public school programs. The LDA estimated the dropout rate to be at least 40 percent for learning disabled students (LDA, 1993)



In a resolution on the requirement for adult education for learning disabled persons, the Learning Disabilities Association of America (LDA, 1993) resolved that a national crisis existed because of the number of adults lacking sufficient literacy skills for independent employment or effective exercise of citizenship. The adult education needs of the more than 40 percent of learning disabled youth who drop out of school were held by the LDA to have been inadequately addressed by program and policy makers at the national and state levels and accused the U.S. Department of Education of erroneously assuming "... that the volunteer tutoring force and part time programs currently available can meet the educational needs of adults with learning disabilities ... " (LDA, 1993, p.1). Nightingale (1991) estimated 15 to 23 percent LD participants in Job Training Partnership Act (JTPA) Title II programs. The U.S. Congress Office of Technology assessment predicted a "quite high" (OTA, 1993, p.67) rate of learning disabilities among certain segments of the population and suggested the rate among adults with reading skills below the eighth grade level may range from 30 to 80 percent.

Diagnosis of learning disabilities has been a thorny area for educators; one of the greatest problems in dealing with learning disabilities is the lack of an adequate instrument to diagnose the disability (Travis, 1979). Differentiation between a lack of capability, ineffective earlier learning, a lack of motivation and a learning disability is extremely difficult (Ross, 1987). Diagnostic tools designed for use with adults are scarce and require cautious use by trained personnel because the assessments are easily misinterpreted by individuals not fully trained in diagnosis (Ross, 1988). The diagnosis problem is complicated because learning disabilities do not occur just in isolation, they may occur in combinations of learning disabilities or combined with other mental or physical problems (Johnson, 1990). Hammill (1993) observed the situation had not greatly improved from what Ross found in 1988, recounting that many tests for learning disabilities have been developed, but most are clinical in nature and designed for administration to children by trained personnel.

Ross and Smith (1990) asked counselors how they identified LD students in adult education programs in Pennsylvania. Results showed test batteries only being used in approximately one third of the cases and then in combination with other indicators such as self reporting by the student and teacher perceptions. The remaining two thirds of the respondents based identification on student self reporting of earlier identification or upon subjective criteria, primarily teacher perceptions. The teacher perceptions referred to were not based on training in the identification and diagnosis of learning disabilities.

Ross and Smith (1990) studied adult educators' perceptions of learning disabilities, concluding an awareness of the needs and characteristics of LD learners was essential to providing appropriate and effective adult education programs. They noted a common perception among adult educators that LD participants could be identified through observing such factors as a failure to learn through normal methods and questioned the effectiveness of such a delimited approach. Although the respondent teachers in the Ross and Smith (1990) study generally felt they could identify and assist LD participants, data collected by Ross and Smith did not support the teachers' contention. The teachers in the Ross and Smith study were unsure whether federal law regarding discriminatory educational



practices applied to LD students in adult education programs. Ross and Smith interpreted Section 504 of the U.S. Rehabilitation Act of 1973 as entitling LD adults to reasonable accommodations, such as untimed testing. They also suggested that the lack of knowledge shown by teachers in the area of law and responsibility may be a problem area in adult education; Ross and Smith identified a shortfall of information on learning disability targeted toward adult educators and recommended additional research.

Statement of the Problem

Learning disabled (LD) students comprise a substantial percentage, if not a majority, of the participants in adult literacy programs (Travis, 1979; OTA, 1993). Despite the fact that public law requires accommodations be made for their disabilities (Ross and Smith, 1990), the needs of these LD adults are not being met (LDA, 1993). One of the primary difficulties lies in screening and detection of learning disabilities (Travis, 1979; Hammill, 1993). Diagnosis is complicated because learning disabilities often in combination or combined with other mental or physical problems. Ross and Smith (1990) noted that while adult education teachers felt they were capable of detecting learning disabilities among their students, that belief was not supported by evidence. A number of studies have pointed out the need additional training in the detection of learning disabilities. In 1994, one state provided statewide training for all supervisors of state adult education programs in the detection and accommodation of learning disabilities. This training consisted of a one hour distance education program downlinked statewide, a presentation at the state supervisors' conference and a two hour training session at the state conference. This study focused on variables relating to screening for learning disabled students and training of teachers. The purpose was to obtain a qualitative snapshot of the condition of learning disabilities screening and training among state funded adult education programs in this particular state.

Methods

This study was designed using qualitative research methods supplemented by descriptive statistics. The qualitative design was chosen to allow inductive analysis of explanatory themes. Themes were derived from both the theoretical base and the practical application as reflected in the professional literature. The themes were expanded to create working hypotheses. Similar methodology was used by Mezirow, Darkenwald and Knox (1975) in a Columbia University study which was crucial to the development of Mezirow's transformation theory (Mezirow, 1978, 1981). Merriam (1987) categorized Houle's The Inquiring Mind (1961) as being rooted in a qualitative research study and cited qualitative studies in adult education conducted by Brookfield (1981) and the team of Mezirow, Darkenwald and Knox (1975).



Instrument

In January, 1995, the National Adult Literacy and Learning Disabilities Center requested adult education agencies provide intended to gather information on Learning Disability Screening practices and interventions. This questionnaire was modified with the addition of questions on (1) whether or not the local program provided specific training for teachers on screening for learning disabilities and in teaching learning disabled adults and (2) if so, how many hours annually would such training comprise.

There were five possible choices relating to screening for learning disabilities. These were (1) use of a standard diagnostic instrument, (2) teacher observation, (3) examination of school records, (4) asking the learner, and (5) do not screen for learning disabilities. The existence of a specific program to train teachers in screening for learning disabilities and in teaching learning disabled adults was offered as a yes/no choice. If the answer on training was affirmative, respondents were asked to provide the number of annual hours of training provided.

Three qualitative questions dealt with areas of program emphasis, methodology for meeting the needs of severely learning disabled adults, and interventions or materials found to be effective in working with adults with learning disabilities. Respondents were asked to respond to the questions in their own words. Areas of appropriate response were identified for each question and validated in the literature.

Sample

The subjects were 36 supervisors of public adult education programs who represented the full composition of public adult education supervisors in the same state in which the research was conducted and who had been documented to have received the learning disabilities training provided by that state. While no data were collected on age, race, sex or education, the minimum requirements for the position included at least a bachelor's degree with some college level coursework in adult education. All respondents met at least the minimum requirement.

Procedure

The instrument was mailed to 81 adult education supervisors (the complete population). Respondents were asked to return the questionnaire by mail or data-fax. After two weeks, non respondents were sent a follow-up letter and another copy of the survey. Survey responses were received from 36 supervisors (44%).

Data Analysis

Descriptive statistics were calculated for the screening methodology subscale and the training subscale. Themes were derived from the responses to the qualitative questions using both the theoretical base and the practical application as reflected in the professional literature. The themes were expanded to create a qualitative construct, concept. This qualitative construct was then used as a metric for the qualitative portion of the study. This metric provided an indicator of the level of



understanding of basic concepts regarding screening for learning disabilities and instructing learning disabled persons.

Results

The results can be broken down into three areas: (1) screening, (2) training, and (3) learning disability concepts.

Screening

Five of the 36 supervisors (13.9%) reported that in their program, they did not attempt to screen for learning disabilities. Ten respondents (27.7%) reported using an instrument; however, only two of the twelve indicated using an instrument which was capable of being used to screen for learning disabilities. Teacher observation was the screening tool of choice for 25 (69.4%) supervisors; check of school records was used by 13 (36.1%). Finally, 25 (69.4%) asked students whether they had been diagnosed with a learning disability.

In the 31 programs where screening was employed, supervisors often reported using more than one method. One (2.7%) supervisor reported using only observation and three (8.3%) reported using only asking the student, otherwise all used at least two methods of screening. Table 1 illustrates the distribution of methods. It is interesting to note that two supervisors (5.5%) reported using all four methods; however, the instrument reported to be used in both cases was not designed to screen for learning disabilities.

Table 1. Screening Methods

| | Instrument | Observation | Records | j | Ask |
|--------------------|------------|-------------|------------|----------|------------|
| Did not screen (5) | n/a | n/a | n/a | 11:2 | n/a |
| 1 method (4) | 0 | 1 (2.7%) | 0 | 44 2+ | 3 (8.3%) |
| 2 methods (13) | 1 (2.7%) | 11 (30.5%) | 4 (11.1%) | | 10 (27.7%) |
| 3 methods (12) | 7 (19.4%) | 11 (30.5%) | 7 (19.4%) | | 11 (30.5%) |
| 4 methods (2) | 2 (5.5%) | 2 (5.5%) | 2 (5.5%) | | 2 (5.5%) |
| total (36) | 10 (27.7%) | 25 (69.4%) | 13 (36.1%) | | 25 (69.4%) |

Training

Ten (27.7%) of the supervisors responded that they provided training for their teachers in identifying learning disabled students and in providing instruction to learning disabled students; the remaining 26 (72.3% 0 did not provide training. Where training was provided, it ranged from 1 hour per year (2 supervisors, 5.5%) to 20 hours per year (1 supervisor, 2.7%). Table 2 provides a listing of the supervisors' responses on hours of training provided.



Table 2 Hours of Training

| Annual hours of training | 1 | 4 | 6 | 8 | 18 | 20 |
|--------------------------|---|---|---|---|----|----|
| Number of Programs (10) | 2 | 3 | 2 | 1 | 1 | 1 |

Learning disability concepts

Themes were derived from the responses to the qualitative questions using both the theoretical base and the practical application as reflected in the professional literature. One theme which emerged was the emphasis on life skills training for learning disabled individuals. A second was a lack of understanding of the literacy needs of learning disabled students, often apparently failing to distinguish between learning disabled and mentally handicapped. This same lack of understanding was reflected in comments to the effect that no learning disabled students participated in adult education. A third theme evolved from the questions regarding the instrument administered for screening--of the 25 supervisors who reported using screening instruments, only two exhibited an understanding of what screening instruments could tell them. As a condition for identification as a theme, triangulation was required between the professional literature and the supervisor's responses on two or more questions. The themes were expanded to create a qualitative construct, concept. This qualitative construct was then used as a metric for the qualitative portion of the study. This metric provided an indicator of the level of understanding of basic concepts regarding screening for learning disabilities and instructing learning disabled persons. In the concept construct, supervisors were assigned a score ranging from 1 to 5. On this scale, 1 indicated a high level of misconception of learning disability concepts, 2 indicated some misconceptions were noted, 3 was a null score displaying neither misconceptions nor understanding, 4 indicated some level of understanding, and 5 indicated a level of understanding of learning disability congruent with familiarity with the literature of the field. Note that these construct values are merely assigned ordinal values and that no meaning can be derived beyond that.

The most frequent of the concept scores was that of a high level of misconception. Answers provided by thirteen supervisors contained statements which were in conflict with the current literature on learning disabilities. Answers provided by seven supervisors indicated some degree of misconception regarding learning disabilities. Nine supervisors provided answers which neither indicated misconceptions nor displayed understanding. Five supervisors provided answers which showed some understanding of learning disabilities concepts and two supervisors provided answers which indicated familiarity with the current literature on learning disabilities.

Discussion

This study was concerned with providing a snapshot of the current state of (1) screening for learning disabilities, (2) training provided for adult education personnel in identifying and accommodating for learning disabilities, and (3) the general level of understanding among adult education supervisors of the basic learning disability concepts as they relate to adult education.



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Despite serving a population of learners which contains a high percentage of learning disabled adults, despite efforts of state supervisory personnel to provide training, and despite the mandate of public law to serve and accommodate learning disabled persons, local screening is often inadequate and probably ineffective, training at the teacher level is infrequent, and many supervisors display a general lack of understanding of learning disabilities. The literature, especially Ross and Smith (1990), indicate adult education teachers believe they can detect and serve learning disabled persons, but such a belief is not supported by data. Adult education supervisors believe they are screening for learning disabilities, but the methods employed (other than referring to school records) are generally inaccurate. Of the two supervisors which were utilizing appropriate instruments for screening, only one provided training for teachers.



Conclusions

Considering the data offered in this study, it appears the following conclusions may be made:

- 1. While many adult education programs are screening for learning disabilities, many are not.
- 2. Among those adult education programs which are screening for learning disabilities, the use of inappropriate instruments, use of untrained teachers observations, and reliance on asking the learner casts doubt on the effectiveness of this screening.
- 3. Training of teachers in screening for learning disabilities and in teaching learning disabled individuals is missing in many cases and of short duration in others.
- 4. Many adult education supervisors do not display an effective grasp of learning disabilities concepts.



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